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B1 (Official Form 1)(04/13)	D0	Cumcni	ıα	gc I oi	51			
	States Bank District of New		ourt				Voluntary	Petition
Name of Debtor (if individual, enter Last, First <b>Dospel, Jan</b>	, Middle):			of Joint De spel, Eva	ebtor (Spouse)	) (Last, First,	Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names):	8 years				used by the J maiden, and		in the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxp (if more than one, state all)  xxx-xx-0608	ayer I.D. (ITIN)/Com	pplete EIN	(if more	our digits o than one, state	all)	Individual-T	Faxpayer I.D. (ITIN) N	o./Complete EIN
Street Address of Debtor (No. and Street, City, 74 Alexandria Drive Hackettstown, NJ	_	ZIP Code <b>07840</b>	74	Address of Alexandı kettstov	ria Drive	(No. and Str	eet, City, and State):	ZIP Code <b>07840</b>
County of Residence or of the Principal Place of Warren		<u> </u>		y of Reside rren	ence or of the	Principal Pla	ice of Business:	10.0.0
Mailing Address of Debtor (if different from str	reet address):		Mailin	g Address	of Joint Debto	or (if differer	nt from street address):	
	Г	ZIP Code	4					ZIP Code
Location of Principal Assets of Business Debto (if different from street address above):	r		•					1
Type of Debtor (Form of Organization) (Check one box)		of Business					tcy Code Under Whield (Check one box)	ch
<ul> <li>■ Individual (includes Joint Debtors)         See Exhibit D on page 2 of this form.</li> <li>□ Corporation (includes LLC and LLP)</li> <li>□ Partnership</li> <li>□ Other (If debtor is not one of the above entities, check this box and state type of entity below.)</li> </ul>	☐ Health Care Bu☐ Single Asset Ru☐ I1 U.S.C. §☐ Railroad☐ Stockbroker☐ Commodity Br☐ Clearing Bank☐ Other	nsiness eal Estate as de 101 (51B)	efined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Ch of ☐ Ch of	napter 15 Petition for R a Foreign Main Proced napter 15 Petition for R a Foreign Nonmain Pr	eding ecognition
Chapter 15 Debtors Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exe	the United States	s	defined "incurr	are primarily co I in 11 U.S.C. § ed by an indivi- onal, family, or l	(Check nsumer debts, 101(8) as dual primarily	busin	are primarily ess debts.
Filing Fee (Check one bo  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's considera debtor is unable to pay fee except in installments. Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerate)	o individuals only). Mustion certifying that the Rule 1006(b). See Office 7 individuals only). Mu	t	otor is a sr otor is not otor's aggr less than s applicable lan is bein eptances	egate nonco 62,490,925 (egate boxes: ag filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	efined in 11 United debts (exc to adjustment		ee years thereafter).
Statistical/Administrative Information  ☐ Debtor estimates that funds will be availabl  ☐ Debtor estimates that, after any exempt proper there will be no funds available for distribution	erty is excluded and	administrative		es paid,		THIS	SPACE IS FOR COURT	USE ONLY
Estimated Number of Creditors	1,000- 5,000 5,001- 10,000		5,001- ),000	50,001- 100,000	OVER 100,000			
Estimated Assets  So to \$50,001 to \$100,001 to \$500,001 to \$50,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million	to \$100 to	00,000,001 \$500 illion	\$500,000,001 to \$1 billion				
Estimated Liabilities	\$1,000,001 \$10,000,001 to \$10 to \$50		00,000,001 \$500	\$500,000,001 to \$1 billion				

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Dospel, Jan Dospel, Eva (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Joan Sirkis Lavery March 31, 2015 Signature of Attorney for Debtor(s) (Date) Joan Sirkis Lavery Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

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#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Jan Dospel

Signature of Debtor Jan Dospel

#### X /s/ Eva Dospel

Signature of Joint Debtor **Eva Dospel** 

Telephone Number (If not represented by attorney)

#### March 31, 2015

Date

#### Signature of Attorney\*

#### X /s/ Joan Sirkis Lavery

Signature of Attorney for Debtor(s)

#### Joan Sirkis Lavery JL4841

Printed Name of Attorney for Debtor(s)

#### Lavery & Sirkis

Firm Name

699 Washington Street Suite 103 Hackettstown, NJ 07840

Address

#### Email: joan.lavery@verizon.net

#### 908-850-6161 Fax: 908-852-7423

Telephone Number

#### March 31, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathbf{X}$ 

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Dospel, Jan

Dospel, Eva

#### Signatures

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

v
Λ

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

#### United States Bankruptcy Court District of New Jersey

In re	Jan Dospel Eva Dospel		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B ID (Official Form 1, Exhibit D) (12/09) - Cont.	Page
statement.] [Must be accompanied by a motion for d  ☐ Incapacity. (Defined in 11 U.S.C. §  mental deficiency so as to be incapable of rea financial responsibilities.);  ☐ Disability. (Defined in 11 U.S.C. §	109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or
	administrator has determined that the credit counseling
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Jan Dospel
Date: March 31, 2015	Jan Dospel

## Case 15-15699-KCF Doc 1 Filed 03/31/15 Entered 03/31/15 10:44:13 Desc Main Document Page 6 of 57

B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court District of New Jersey

In re	Jan Dospel Eva Dospel	(	Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable	
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness	or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to	
financial responsibilities.);	,0
	oina
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of b	_
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telepho	one, or
through the Internet.);	
☐ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counse	eling
requirement of 11 U.S.C. § 109(h) does not apply in this district.	
I certify under penalty of perjury that the information provided above is true and correct.	•
Signature of Debtor: /s/ Eva Dospel	
Eva Dospel	
Date: March 31, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court**District of New Jersey

In re	Jan Dospel,		Case No.	
	Eva Dospel			
-		Debtors	Chapter	7
			•	

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	18,968.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		4,020.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		157,438.24	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,914.08
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,964.00
Total Number of Sheets of ALL Schedu	ıles	24			
	To	otal Assets	18,968.00		
		1	Total Liabilities	161,458.24	

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B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court District of New Jersey**

In re	Jan Dospel,		Case No		
	Eva Dospel				
_		Debtors	Chapter	7	

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 12)	2,914.08
Average Expenses (from Schedule J, Line 22)	2,964.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,578.84

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		157,438.24
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		157,438.24

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B6A (Official Form 6A) (12/07)

#### Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property Husband, Wife, Joint, or Community Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Jan Dospel,	Case No
	Eva Dospel	

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

		, , , , ,		` '
	Type of Property	N O Description and Location of Property E	JOHIL, OI	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	money in bank accounts	J	1,100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	security deposit	J	1,500.00
4.	Household goods and furnishings, including audio, video, and computer equipment.	household goods and furniture	J	2,500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	clothing	J	500.00
7.	Furs and jewelry.	constume jewelry	J	200.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	term only	Н	0.00
10.	Annuities. Itemize and name each issuer.	x		
			Sub-Tota	ıl > <b>5,800.00</b>
			(Total of this page)	n > 5,000.00

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In 1	re	Jan Dospel, Eva Dospel			Case No	
		<del>-</del>	SCHEDU	Debtors  LE B - PERSONAL PROPEI  (Continuation Sheet)	RTY	
		Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	define under as def Give precord	ests in an education IRA as ed in 26 U.S.C. § 530(b)(1) or a qualified State tuition plan fined in 26 U.S.C. § 529(b)(1). particulars. (File separately the d(s) of any such interest(s). S.C. § 521(c).)	х			
	other	ests in IRA, ERISA, Keogh, or pension or profit sharing Give particulars.	401K		н	Unknown
	Stock and un Itemiz	and interests in incorporated nincorporated businesses. ze.	x			
14.		ests in partnerships or joint res. Itemize.	X			
	and of	rnment and corporate bonds ther negotiable and egotiable instruments.	X			
16.	Accou	unts receivable.	X			
	prope	ony, maintenance, support, and arty settlements to which the r is or may be entitled. Give ulars.	X			
		liquidated debts owed to debtor ling tax refunds. Give particulars.				
	estate exerci debtor	able or future interests, life s, and rights or powers isable for the benefit of the r other than those listed in dule A - Real Property.	X			
	intere death	ngent and noncontingent sts in estate of a decedent, benefit plan, life insurance y, or trust.	X			
	claims tax res debtos	contingent and unliquidated s of every nature, including funds, counterclaims of the r, and rights to setoff claims. estimated value of each.	X			
					Sub-Tota (Total of this page)	al > <b>0.00</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached

to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Jan Dospel,	Case No.
	Eva Dospel	

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	scription and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	x			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2005 Hyundai S -over 120,000 m		J	2,681.00
		2010 Hyundai To -over 60,000 mil		J	10,487.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	x			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	x			
33.	Farming equipment and implements.	x			
34.	Farm supplies, chemicals, and feed.	x			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page)

13,168.00

Total >

18,968.00

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B6C (Official Form 6C) (4/13)

In re	Jan Dospel,	Case No.
	Eva Dospel	

#### Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafte
■ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accordance in bank accounts	unts, Certificates of Deposit 11 U.S.C. § 522(d)(5)	1,100.00	1,100.00
Security Deposits with Utilities, Landlords, a security deposit	nd Others 11 U.S.C. § 522(d)(5)	1,500.00	1,500.00
Household Goods and Furnishings household goods and furniture	11 U.S.C. § 522(d)(3)	2,500.00	2,500.00
Wearing Apparel clothing	11 U.S.C. § 522(d)(3)	500.00	500.00
Furs and Jewelry constume jewelry	11 U.S.C. § 522(d)(4)	200.00	200.00
Interests in Insurance Policies term only	11 U.S.C. § 522(d)(7)	0.00	0.00
Interests in IRA, ERISA, Keogh, or Other Per 401K	nsion or Profit Sharing Plans 11 U.S.C. § 522(d)(12)	Unknown	Unknown
Automobiles, Trucks, Trailers, and Other Ve 2005 Hyundai Santa Fe -over 120,000 miles	hicles 11 U.S.C. § 522(d)(2)	2,681.00	2,681.00
2010 Hyundai Tuscon -over 60,000 miles	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)	4,669.00 1.798.00	10,487.00

T 4 1	4404000	40.000.00
Total:	14.948.00	18.968.00

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B6D (Official Form 6D) (12/07)

•		
In re	Jan Dospel,	Case No.
	Eva Dospel	

Debtors

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	G	UNLIQUIDA	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			car Ioan	╹	D A T E D			
Hyundai Finance PO Box 650805 Dallas, TX 75265-0805		J	2010 Hyundai Tuscon -over 60,000 miles					
			Value \$ 10,487.00				4,020.00	0.00
Account No.			,	П			,	
			Value \$	Ш				
Account No.								
	_		Value \$	Ц		Ш		
Account No.								
			Value \$					
	<u></u>			ubto	nt a	닊		
<b>0</b> continuation sheets attached			(Total of the				4,020.00	0.00
				-	ota	ŀ	4.020.00	0.00
			(Report on Summary of Sc				4,020.00	0.00

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B6E (Official Form 6E) (4/13)

In re	Jan Dospel,	Case No.	
	Eva Dospel		
_			

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

Check this box it debtor has no creditors holding this ecuted priority claims to report on this schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ <b>Deposits by individuals</b> Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

0 continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Jan Dospel, Eva Dospel		Case No.	
		Debtors		

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

			F					
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	U	D	7	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	СОДШВТОК	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N G	UZU-CO-DAF	U T F	!	AMOUNT OF CLAIM
Account No. 2828					E D			
Anesthesia Assoc of Morristown, PA PO Box 7319 Bedminster, NJ 07921		J			D			357.00
Account No.				$\Box$	П	Г	Ť	
Anesthesia Associates of Morristown PO Box 24002 Newark, NJ 07101-0406		J						357.00
Account No. xxxxxxxx9727				Н	Н	┢	+	
Barclary Bank Delaware 125 S. West Street Wilmington, DE 19801		J						Unknown
Account No. xxxxxxxx0960				Н	П	T	$\dagger$	
Barclays Bank of Delaware 125 South West Street Wilmington, DE 19801		J						Unknown
40				Subt	ota	<u> </u>	T	744.00
			(Total of t	nis į	pag	ţe)		714.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
_	Eva Dospel	

		_				_	_	
CREDITOR'S NAME,	C	Н	Hus	band, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	Н	н	DATE OF A BANKA C BICHIPPED AND	CONT	Ľ	D I S P	
INCLUDING ZIP CODE,	B		w	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM		ď	U	
AND ACCOUNT NUMBER	T		J	IS SUBJECT TO SETOFF, SO STATE.	N	U	T	AMOUNT OF CLAIM
(See instructions above.)	Ř	ľ	С	is sobtlet to setott, so strite.	N G E N	lъ	Þ	
Account No. xxxxxxxx3314		T			Ť	ĀTED		
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Capital One		١.	. I					
PO Box 30285		J	J					
Salt Lake City, UT 84130-0285								
								Unknown
Account No. xxxxxxxx2917								
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Capital One Bank USA, NA		١.	. I					
PO Box 71083		J	J					
Charlotte, NC 28272-1083								
								265.00
Account No. xxxxxxxx4835					П			
	1							
Capital One Bank USA, NA								
PO Box 71083		J	J					
Charlotte, NC 28272-1083								
								1,017.00
Account No. 1098	T	T			T			
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Capital One/PayPal Smart Connect								
PO Box 30253		J	J					
Salt Lake City, UT 84130-0253								
								2,132.58
Account No. 2394	t	t	$\dashv$		T		H	
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Chase	1							
PO Box 15153	1	J	J					
Wilmington, DE 198865153								
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								8,969.00
	_				$oxed{oxed}$			0,303.00
Sheet no. <u>1</u> of <u>10</u> sheets attached to Schedule of					Subt			12,383.58
Creditors Holding Unsecured Nonpriority Claims				(Total of t	nis j	pag	ge)	12,000.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
	Eva Dospel	

		_					
CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	N H	CONSIDERATION FOR CLAIM. IF CLAIM	CONTINGENT	Q U	SPUTE	AMOUNT OF CLAIM
(See instructions above.)	Ř	С	is sebated to strong, so similar	E	D A T	Þ	
Account No. 5591				Ť	T E D		
Chase PO Box 15153 Wilmington, DE 198865153		J					12,625.00
Account No. 8785	┝	-		-	$\vdash$		12,023.00
	1						
Chase PO Box 15153 Wilmington, DE 198865153		J					
Willington, 52 13000103							
							18,821.00
Account No. 8842							
Chase PO Box 15153 Wilmington, DE 198865153		J					
							5,513.00
Account No. 5404	t						
Chase PO Box 15153 Wilmington, DE 198865153		J					500.00
		L			L		500.00
Account No. xxxxxxx8831	-						
Chase Bank One Card Serv PO Box 15298 Wilmington, DE 19850		J					
							Unknown
Sheet no. <b>2</b> of <b>10</b> sheets attached to Schedule of			1	Subt	ota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				37,459.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
	Eva Dospel	
	•	

CREDITOR'S NAME,	C	Н	Hus	band, Wife, Joint, or Community	C	U	D	Т	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxxxxxxx7458	C O D E B T O R	J C	۸ ا	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	NL I QU I DATE	DISPUTED		AMOUNT OF CLAIM
Chase Bank One Card Serv PO Box 15298 Wilmington, DE 19850		J	J			D			Unknown
Account No. xxxxxxxx7550  Chase Bank One Card Serv PO Box 15298 Wilmington, DE 19850		J	J						Unknown
Account No. xxxxxxxx9535  Chase Bank One Card Serv PO Box 15298 Wilmington, DE 19850		J	J						Unknown
Account No. xxx2 945  Diagnostic-Techs, Inc. c/o Renton Collections 211 Morris Avenue South Renton, WA 98055		J	J						106.00
Account No. xxxx*xxxx5749  Hackensack Pathology Associates, LLC PO Box 95000-4105 Philadelphia, PA 19195-0001		J	J						659.96
Sheet no. <b>3</b> of <b>10</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				(Total of t	Subt his				765.96

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
_	Eva Dospel	

CREDITOR'S NAME,	S	ŀ	Hus	sband, Wife, Joint, or Community	CON	U N L	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	1	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	TINGEN	I QU I D	P U T E	AMOUNT OF CLAIM
Account No. x1574					Т	A T E		
Hackensack Pathology Associates, LLC PO Box 95000-4105 Philadelphia, PA 19195-0001		,	J			D		178.00
Account No. x4871		Ť						
Hackensack Pathology Associates, LLC PO Box 95000-4105 Philadelphia, PA 19195-0001			J					96.00
		1						90.00
Account No. xx-xxxx62-11  Hackettstown Community Hospital 651 Willow Grove Street Hackettstown, NJ 07840			J					1,176.00
Account No. x2485								
Hackettstown Diagnostics Imaging 254B Mountian Avenue Suite 102 Hackettstown, NJ 07840			J					105.00
Account No. xxxx xxxx 1-1 /CG	t	t	$\exists$				Г	
Hackettstown Radiology Associates PO Box 655 Hackettstown, NJ 07840		,	J					150.40
Sheet no. 4 of 10 sheets attached to Schedule of	_	_		S	ubt	ota	1	4 705 10
Creditors Holding Unsecured Nonpriority Claims				(Total of the	nis j	pag	ge)	1,705.40

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
_	Eva Dospel	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	P	
MAILING ADDRESS	CODEBTOR	н	DATE CLANA WAS DIGWEDED AND	CONT	Ľ	D I S P	
INCLUDING ZIP CODE,	B	w	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	l¦	Q	U	
AND ACCOUNT NUMBER	T	J	IS SUBJECT TO SETOFF, SO STATE.	N	Q U I	T E	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subster to serori, so sixte.	INGENT	lъ		
Account No.			all bills incurred prior to filing	] Ť	A T E D		
l.,, . <b>.</b>	ı			$\vdash$	۳		-
Hackettstown Regional Medical	ı	١.					
Center	ı	J					
PO Box 2	ı						
Hackettstown, NJ 07840	ı						
							3,762.00
Account No. 7124				T	Т		
	ı						
HSBC	ı	١.					
PO Box 17313	ı	J					
Baltimore, MD 21297	ı						
	ı						
							7,716.00
Account No. 4900				$\top$	Г		
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HSBC	ı						
PO Box 17313	ı	J					
Baltimore, MD 21297	ı						
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Account No. <b>7055</b>	╁	H		+	┢		
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HSBC	ı						
PO Box 17313	ı	J					
Baltimore, MD 21297	ı						
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							5,199.00
Account No. 1335	╁	H		+	$\vdash$	H	
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Juniper Bank	I						
P.O. Box 13337	1	J				l	
Philadelphia, PA 191013337	I	Ĺ					
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	I						E 600 00
				$\perp$	L		5,603.00
Sheet no. <u>5</u> of <u>10</u> sheets attached to Schedule of				Subt			31,115.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	31,113.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No
	Eva Dospel	
	•	

CREDITOR'S NAME,	C	Н	sband, Wife, Joint, or Community		3	ŭ	D	
MAILING ADDRESS	CODEBTOR	Н			Ĭ	U N L	S	
INCLUDING ZIP CODE,	I E	W	DATE CLAIM WAS INCURRED AND		1		P U	
AND ACCOUNT NUMBER	Ĭ	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	j	1	Q U	Ĭ	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to seture, so state.	1 C E		ЬΙ	E D	
Account No. 0012	T	T		<b>-</b>  -	1	A T E		
				-	+	D		
Juniper Bank		١.						
P.O. Box 13337		J						
Philadelphia, PA 191013337								
								3,560.00
Account No. xxxxxx0969	Γ							
KIA Motor Finance		١.						
10550 Talbert Avenue		J						
Fountain Valley, CA 92708-6031								
								4,209.00
Account No. x5206		T			T	T		
	1							
Medical Care Associates								
137 Mountain Ave		J						
Hackettstown, NJ 07840								
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								32.58
Account No. xxxxxxxxxxx1109	╁	╁		+	+	+		
Account No. AAAAAAAAAAAAA	┨							
Medical Payment Data								
c/o Berks Credit & Collection		J						
PO Box 329		ľ						
Temple, PA 19560								
Temple, FA 19300								4 007 00
								1,627.00
Account No. xx8505		Г			Τ	T		
	1							
Newton Anesthesia Associates, LLC								
605 Broad Ave Suite 106		J						
Ridgefield, NJ 07657								
""	1							
								455.00
		L						70000
Sheet no. 6 of 10 sheets attached to Schedule of				Su				9,883.58
Creditors Holding Unsecured Nonpriority Claims			(Total	of this	s p	age	e)	3,000.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No.
	Eva Dospel	
-		j ,

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	C	U N L	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxxx xx76 38	C O D E B T O R	C A M	IS SUBJECT TO SETOFF, SO STATE.	CONFLNGENT	LIQUIDATE	P U T E	AMOUNT OF CLAIM
Account No. XXXX XX/6 38	4		all bills incurred prior to filing	`	Ė		
Newton Medical Center PO Box 36485 Newark, NJ 07188-6458		J					999.00
Account No. x4878	T			T	T	T	
Orthopedic Institute of New Jersey PO Box 4812 Lancaster, PA 17604		J					50.55
	╀	╀		╄	╄	⊢	-
Account No. xxxx-xxxx-8429  Paypal Buyer Credit PO Box 960080  Orlando, FL 32896-0080		J					1,587.00
Account No. 1098	T			T	T		
Paypal Buyer Credit PO Box 960080 Orlando, FL 32896-0080		J					2,053.00
Account No. xxxxxx #xxxxx0519	✝	H		+	$\vdash$	$\vdash$	
Perricone c/o SKO Brenner American, Inc. 40 Daniel Street Farmingdale, NY 11735		J					159.90
Sheet no. <b>7</b> of <b>10</b> sheets attached to Schedule of				Subt	tota	ıl	4.040.45
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	4,849.45

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No
	Eva Dospel	
	•	

CREDITOR'S NAME,	Ç	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. x3829	C O D E B T O R	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGENT	LQU	I S P U T E D	AMOUNT OF CLAIM
Account No. X3829	ł			Ι΄	Ė		
Radiologic Assoc of NNJ, PA PO Box 10728 Lancaster, PA 17605-0728		J					103,00
Account No. x3238							103.00
Radiology Associates P.O. Box 48 Daytona Beach, FL 321150048		J					
							71.00
Account No. xxxxx x7296  Skylands Urology Group, PA 89 Sparta Ave, Suite 200 Sparta, NJ 07871-1790		J					
Account No. x7296	_		all bills incurred prior to filing				971.91
Skylands Urology Group, PA 89 Sparta Ave, Suite 200 Sparta, NJ 07871-1790	1	J	an and mounted prior to ming				971.91
Account No. xx-xxxx09-13	$\vdash$			+	_		071.31
Specialty Surgical Center LLC PO Box 48320 Newark, NJ 07101-4820		J					1,832.00
Sheet no. <b>_8</b> of <b>_10</b> _ sheets attached to Schedule of	1_	_		Sub	L tots	<u>L</u>	
Creditors Holding Unsecured Nonpriority Claims			(Total of				3,949.82

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No
	Eva Dospel	
		,

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	Ü	Þ	
MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	11 1	DZLLQD	S P U	AMOUNT OF CLAIM
AND ACCOUNT NUMBER (See instructions above.)	O R	C	IS SUBJECT TO SETOFF, SO STATE.	N G E N	I D	E D	AMOUNT OF CLAIM
Account No. xxxx xxxx xxxx 0708				T	Ā T E D		
Sussex Pathology, LLG							
PO Box 66799 Falmouth, ME 04105-6799		J					
amount, we 04103-0733							
							176.16
Account No. xxxxxxxx0171			bankruptcy dismissed				
SYNCB/Paypal Smart Conn							
PO Box 965005 Orlando, FL 32896		J					
31dild0, 1 E 32030							
							2,132.00
Account No. 9697	1						
U.S. Department of Education							
PO Box 530260 Atlanta, GA 303530260		J					
Alianta, GA 303330200							
							1,248.69
Account No. 5591	1						
Washington Mutual Bank							
PO Box 99604 Arlington, TX 76096-9604		J					
Armington, 1x 70090-9004							
							17,284.72
Account No. 2394	-						
Washington Mutual Bank							
PO Box 99604 Arlington, TX 76096-9604		J					
7.1111gton, 17.70000-3004							
							4,310.05
Sheet no. 9 of 10 sheets attached to Schedule of				Subt			25,151.62
Creditors Holding Unsecured Nonpriority Claims			(Total of t	11S J	pag	e)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Jan Dospel,	Case No
_	Eva Dospel	,

	1 0	1		1.		_	ı
CREDITOR'S NAME,	CODEBTO	Hu	sband, Wife, Joint, or Community	CONTI	N	DISPUTED	
MAILING ADDRESS	E	Н	DATE CLAIM WAS INCURRED AND	N T	L	S P	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	В	W J	CONSIDERATION FOR CLAIM. IF CLAIM	I	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	Ö	C	IS SUBJECT TO SETOFF, SO STATE.	Ğ	ĭ	Ė	AMOUNT OF CLAIM
	R	_		N	D A T E	D	
Account No. <b>8785</b>				Т	E		
					D	_	
Washington Mutual Bank							
PO Box 99604		J					
Arlington, TX 76096-9604							
							21,964.56
	4_	_		╄		_	,
Account No. 8842							
Washington Mutual Bank							
PO Box 99604		J					
Arlington, TX 76096-9604							
							7,496.27
	4_	_		╙	_		-,
Account No.	1						
Account No.							
	1						
Account No.							
		1					
	1	1					
	1						
Sheet no10_ of _10_ sheets attached to Schedule of			5	Subt	ota	1	20.460.02
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	29,460.83
			<i>a</i>		`ota		157,438.24
			(Report on Summary of So	hed	lule	s)	157,430.24

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B6G (Official Form 6G) (12/07)

In re	Jan Dospel,	Case No.
	Eva Dospel	
_	•	· · · · · · · · · · · · · · · · · · ·

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Debtors

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

landlord

yearly lease of apartment for \$1135.00 per month

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B6H (Official Form 6H) (12/07)

In re	Jan Dospel,	Case No.
	Eva Dospel	

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your c	ase:							
Deb	otor 1 Jan Dospel				_				
	otor 2 Eva Dospel				_				
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW .	IERSEY		_				
(If kr	se number nown)		-			- ''	ded filing nent showi	ing post-petition following date:	
0	fficial Form B 6I					MM / DD	YYYY		
S	chedule I: Your Inc	ome							12/13
atta	use. If you are separated and you ch a separate sheet to this form.  The Describe Employment information.		Debtor 1			d case number (	f known).		
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			□ Em	,		
			☐ Not employed				employed		
	employers.	Occupation				unem	ployed		
	Include part-time, seasonal, or self-employed work.	Employer's name	Thomas & Betts	S					
	Occupation may include student or homemaker, if it applies.	Employer's address	Hackettstown,	NJ 0784	0				
		How long employed t	here?						
Par	t 2: Give Details About Mo		<u></u>						
<b>Esti</b> spou	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have mee space, attach a separate sheet to	ate you file this form. If					·	·	
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,619.24	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lii	ne 2 + line 3.		4.	\$	3,619.24	\$	0.00	

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	tor 1 tor 2	Jan Dospel Eva Dospel	-	Cas	se number (if known)				
				F	or Debtor 1		r Debtor 2 or n-filing spou		
	Cop	by line 4 here	4.	\$	3,619.24	\$	0	.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	744.99	\$	0	.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	243.66	\$		.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	339.95	\$		.00	
	5e.	Insurance	5e.	\$	253.24	\$	0	.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0	.00	
	5g.	Union dues	5g.	\$	0.00	\$	0	.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$ _	0	.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,581.84	\$	0	.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,037.40	\$	0	.00	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0 -	•		•			
	Oh	monthly net income.  Interest and dividends	8a. 8b.	\$ \$	0.00	\$ <u></u>		.00	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent		Φ.	0.00	Φ_	0	.00	
	oc.	regularly receive Include alimony, spousal support, child support, maintenance, divorce		•		•			
	0.1	settlement, and property settlement.	8c.	\$	0.00	\$_		.00	
	8d.	• • •	8d.	<b>\$</b>	0.00	\$_	876		
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8e. 8f.	\$. \$	0.00	\$ <u> </u>		0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0	.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0	.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	87	6.68	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,037.40 + \$		<b>876.68</b> = \$	; <u>2</u>	2,914.08
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depen		•	•	Schedule J. 11. +\$		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	2	2,914.08
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?					mbine nthly i	d income
		Vec Evolain:							

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Filli	n this inform	ation to identify y	our case:						
Debt	tor 1	Jan Dospel				Ch	neck if this is:		
200	.01 1	Jan Dospei							
Debt	tor 2	Eva Dospel					•	ving post-petition cha	apter
(Spo	use, if filing)	•					13 expenses as of	the following date:	
Unite	ed States Bank	cruptcy Court for the	e: <u>DISTRI</u>	CT OF NEW JERSEY			MM / DD / YYYY		
Case	e numbe <b>r</b>						A separate filing fo	r Debtor 2 because [	Debtor
	nown)						2 maintains a sepa		305101
Of	ficial Fo	orm B 6J							
		J: Your	_ Evnor	1606					40/40
				ISES  If two married people ar	a filing tagathar ba	th are o	rually recognished for	er cumplying correct	12/13
info	rmation. If n		eeded, atta	ch another sheet to this					
Part		ribe Your House	ehold						
1.	Is this a joi								
	□ No. Go t								
	■ Yes. <b>Do</b>	es Debtor 2 live	in a separa	ate household?					
		No							
		es. Debtor 2 mu	st file a sep	parate Schedule J.					
2.	Do you hav	ve dependents?	■ No						
	Do not list I Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	e the						□ No	
	dependents	s' names.						Yes	
								□ No	
								☐ Yes	
								□ No □ Yes	
								□ res	
								□ Yes	
3.	•	penses include	_	No			_		
		of people other to nd your depende	than $_{oldsymbol{\square}}$	Yes					
	yoursen ar	ia your depende	311123						
		nate Your Ongo							
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp					
Incl	uda avnans	es paid for with	non-cash	government assistance it	f vou know				
				cluded it on Schedule I: Y					
(Off	icial Form 6	l.)					Your exp	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage		\$	1,135.00	
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$	0.00	
		erty, homeowner'	s, or renter	's insurance		4b.	· -	0.00	
	4c. Home	e maintenance, re	epair, and ι	ıpkeep expenses		4c.	\$	0.00	
		eowner's associa				4d.	·	0.00	
5.	Additional	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00	

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	otor 1 otor 2	Jan Dos Eva Dos		Case num	ber (if known)	
_ 00	<b>-</b>		<del></del>	- COO 110111	(	
6.	Utilit			-	•	
	6a.	-	heat, natural gas	6a.		60.00
	6b.	•	ver, garbage collection	6b.	·	0.00
	6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	*	224.00
7	6d.	Other. Spe	•	6d.		0.00
7. 0			ekeeping supplies	7.	\$	600.00
8.			hildren's education costs	8. 9.	\$	0.00
9. 10		•	ry, and dry cleaning roducts and services	9. 10.	\$ \$	25.00
11.		-	ntal expenses	11.	·	20.00
			Include gas, maintenance, bus or train fare.	11.	Ψ	195.00
12.			ar payments.	12.	\$	180.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			ributions and religious donations	14.	\$	0.00
15.	Insu	rance.	•			
			surance deducted from your pay or included in lines 4 or 20.		_	
		Life insura		15a.	·	0.00
		Health ins		15b.		0.00
		Vehicle ins		15c.		150.00
			rance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines 4 or 20.	40	<b>c</b>	0.00
17	Spec	·	ease payments:	16.	\$	0.00
17.			ents for Vehicle 1	17a.	\$	330.00
			ents for Vehicle 2	17b.		0.00
		Other. Spe		17c.	·	0.00
		Other. Spe		17d.	·	0.00
18.		•	of alimony, maintenance, and support that you did not report a		<u> </u>	0.00
			your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
19.	Othe	er payments	s you make to support others who do not live with you.		\$	0.00
	Spec			19.	_	<u> </u>
20.			erty expenses not included in lines 4 or 5 of this form or on Sch			0.00
			s on other property	20a.		0.00
		Real estat		20b.	·	0.00
		. ,	nomeowner's, or renter's insurance	20c. 20d.		0.00
			ice, repair, and upkeep expenses		·	0.00
04			er's association or condominium dues	20e.		0.00
21.	Otne	er: Specify:	pet food/vet care	21.	+\$	45.00
22.			xpenses. Add lines 4 through 21.	22.	\$	2,964.00
			r monthly expenses.		-	
23.			monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	·	2,914.08
	23b.	Copy your	monthly expenses from line 22 above.	23b.	- <b>\$</b>	2,964.00
	220	Subtract	our monthly expenses from your monthly income			
	∠3C.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	-49.92
		THE TOTAL	jou			
24.			an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yo			ise or decrease because of a
			terms of your mortgage?			22222222222222222
	■ N	0.				
	□ Ye	es.				
	Expla					

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B6 Declaration (Official Form 6 - Declaration). (12/07)

#### United States Bankruptcy Court District of New Jersey

In re	Jan Dospel Eva Dospel		Case No.	
•		Debtor(s)	Chapter	7

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	DECLINATION CIVILIN	TEMETI	of telesort by individual debror	
	I declare under penalty of perjury sheets, and that they are true and correct to		ad the foregoing summary and schedules, consisting of _y knowledge, information, and belief.	26
Date	March 31, 2015	Signature	/s/ Jan Dospel Jan Dospel Debtor	
Date	March 31, 2015	Signature	/s/ Eva Dospel Eva Dospel Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

## United States Bankruptcy Court District of New Jersey

In re	Jan Dospel Eva Dospel		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$56,801.00 2014 gross income \$41,656.00 2013 gross income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$5,379.00 2014 unemployment

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AMOUNT SOURCE

\$2,386.00 2013 unemployment

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
DATES OF
PAYMENTS
AMOUNT PAID
OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

Specialty Surgical Center vs. Eva Dospel

NATURE OF
PROCEEDING
COURT OR AGENCY
AND LOCATION
Superior Court of NJ-Warren County
pending

DC-000909-13

Hackettstown Community Hospital vs. Eva collection Superior Court of NJ-Warren County pending

Dospel DC-002362-11

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Joan Lavery, Esquire 699 Washington Street Suite 103 Hackettstown, NJ 07840 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1150.00 plus court filing fee
plus cccs

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#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

GOVERNMENTAL ON INCIDE

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six vears immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None 1

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

**NAME** 

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

DATE OF TERMINATION

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

**ADDRESS** DATE OF WITHDRAWAL NAME

TITLE

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	March 31, 2015	Signature	/s/ Jan Dospel	
			Jan Dospel	
			Debtor	
Date	March 31, 2015	Signature	/s/ Eva Dospel	
		•	Eva Dospel	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court District of New Jersey

In re	Jan Dospel Eva Dospel			Case No.	
	•		Debtor(s)	Chapter	7
PART	CHAPTER 7 IN  A - Debts secured by property of property of the estate. Attach a	of the estate. (Part A			
Proper	ty No. 1	additional pages if ite			
	tor's Name: lai Finance		Describe Property S 2010 Hyundai Tusco -over 60,000 miles		
-	ty will be (check one): Surrendered	■ Retained	- 1		
	ning the property, I intend to (check Redeem the property Reaffirm the debt Other. Explain ty is (check one):		void lien using 11 U.S.C	C. § 522(f)).	
	Claimed as Exempt		☐ Not claimed as ex	empt	
Attach	<b>B</b> - Personal property subject to una additional pages if necessary.)	expired leases. (All thro	ee columns of Part B mu	ust be completed	for each unexpired lease.
Lessor landlo	r's Name: rd	Describe Leased P yearly lease of apa per month	roperty: rtment for \$1135.00	Lease will be A U.S.C. § 365(p ■ YES	Assumed pursuant to 11 a)(2): Box NO
	re under penalty of perjury that t al property subject to an unexpir		y intention as to any pi	coperty of my es	state securing a debt and/or
Date _	March 31, 2015	Signature	/s/ Jan Dospel Jan Dospel Debtor		
Date _	March 31, 2015	Signature	/s/ Eva Dospel		

Joint Debtor

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# **United States Bankruptcy Court**District of New Jersey

In re	Jan Dospel <sup>©</sup> Eva Dospel		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule paid to me within one year before the filing of the pet behalf of the debtor(s) in contemplation of or in conn	2016(b), I certify that I am the attotition in bankruptcy, or agreed to b	orney for the above-ne paid to me, for serv	amed debtor and that compensation
	For legal services, I have agreed to accept		\$ <u></u>	1,150.00
	Prior to the filing of this statement I have received	ed	\$	1,150.00
				0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed co	mpensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspect	s of the bankruptcy	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, so c. Representation of the debtor at the meeting of cred. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors to reaffirmation agreements and applications.</li> </ul>	statement of affairs and plan which ditors and confirmation hearing, an o reduce to market value; ex- tions as needed; preparation	n may be required; and any adjourned hea	rings thereof;
б.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in
Date	ed: March 31, 2015	/s/ Joan Sirkis La	ivery	
		Joan Sirkis Lave	ry	
		Lavery & Sirkis 699 Washington	Street	
		Suite 103		
		Hackettstown, N. 908-850-6161 Fa		
		joan.lavery@veri		

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court District of New Jersey**

		<b>District of New Jersey</b>		
In re	Jan Dospel Eva Dospel		Case No.	
		Debtor(s)	Chapter 7	,
		ON OF NOTICE TO CONSU 342(b) OF THE BANKRUP	`	3)
		<b>Certification of Debtor</b>		0.040(1) (0.4) (0.4)
Code.	I (We), the debtor(s), affirm that I (we)	have received and read the attached	notice, as required by	§ 342(b) of the Bankruptcy
Jan D Eva D	•	X /s/ Jan Dosp	el	March 31, 2015
Printe	d Name(s) of Debtor(s)	Signature of	Debtor	Date
Case N	No. (if known)	X /s/ Eva Dosp	el	March 31, 2015
		Signature of	Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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# **United States Bankruptcy Court**District of New Jersey

In re	Jan Dospel Eva Dospel		Case No.	
		Debtor(s)	Chapter	7
The abo	VERIFICAT  ove-named Debtors hereby verify that the atta	CION OF CREDITOR MA		of their knowledge.
Date:	March 31, 2015	/s/ Jan Dospel		
		Jan Dospel		
		Signature of Debtor		
Date:	March 31, 2015	/s/ Eva Dospel		
		Eva Dospel		

Signature of Debtor

Anesthesia Assoc of Morristown, PA PO Box 7319 Bedminster, NJ 07921

Anesthesia Associates of Morristown PO Box 24002 Newark, NJ 07101-0406

Barclary Bank Delaware 125 S. West Street Wilmington, DE 19801

Barclays Bank of Delaware 125 South West Street Wilmington, DE 19801

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA, NA PO Box 71083 Charlotte, NC 28272-1083

Capital One/PayPal Smart Connect PO Box 30253 Salt Lake City, UT 84130-0253

Chase PO Box 15153 Wilmington, DE 198865153

Chase Bank One Card Serv PO Box 15298 Wilmington, DE 19850

Diagnostic-Techs, Inc. c/o Renton Collections 211 Morris Avenue South Renton, WA 98055

Dynia & Associate, LLC 4849 N Milwaukee Ave. Suite 801 Chicago, IL 60630

Galaxy International Purchasing, LLC c/o Dynia & Associates, LLC 4849 North Milwaukee Ave Suite 801 Chicago, IL 60630

Galaxy International Purchasing, LLC c/o Dynia & Associates, LLC 4849 N. Milwaukee Ave Chicago, IL 60630

Gem Recovery Systems PO Box 85 Emerson, NJ 07630-0085

Hackensack Pathology Associates, LLC PO Box 95000-4105 Philadelphia, PA 19195-0001

Hackettstown Community Hospital 651 Willow Grove Street Hackettstown, NJ 07840

Hackettstown Diagnostics Imaging 254B Mountian Avenue Suite 102 Hackettstown, NJ 07840

Hackettstown Radiology Associates PO Box 655 Hackettstown, NJ 07840

Hackettstown Regional Medical Center PO Box 2 Hackettstown, NJ 07840

HSBC PO Box 17313 Baltimore, MD 21297

HSS Collection Agency PO Box 116 Cliffside Park, NJ 07010

Hyundai Finance PO Box 650805 Dallas, TX 75265-0805

Juniper Bank P.O. Box 13337 Philadelphia, PA 191013337

KIA Motor Finance 10550 Talbert Avenue Fountain Valley, CA 92708-6031

Lancaster Collections 218 W. Orange Street Lancaster, PA 17603

landlord

Medical Care Associates 137 Mountain Ave Hackettstown, NJ 07840

Medical Payment Data c/o Berks Credit & Collection PO Box 329 Temple, PA 19560

Nationwide Credit, INC PO Box 26314 Lehigh Valley, PA 18002-6314

Newton Anesthesia Associates, LLC 605 Broad Ave Suite 106 Ridgefield, NJ 07657

Newton Medical Center PO Box 36485 Newark, NJ 07188-6458

Orthopedic Institute of New Jersey PO Box 4812 Lancaster, PA 17604 P.D.A.B. Inc. 66 Ford Rd Suite 114 Denville, NJ 07834

Paypal Buyer Credit PO Box 960080 Orlando, FL 32896-0080

Perricone c/o SKO Brenner American, Inc. 40 Daniel Street Farmingdale, NY 11735

Radiologic Assoc of NNJ, PA PO Box 10728 Lancaster, PA 17605-0728

Radiology Associates P.O. Box 48 Daytona Beach, FL 321150048

Remex Inc. 307 Wall St Princeton, NJ 08540

Savit Collection Agency P.O. Box 250 E. Brunswick, NJ 88160250

Skylands Urology Group, PA 89 Sparta Ave, Suite 200 Sparta, NJ 07871-1790

Specialty Surgical Center LLC PO Box 48320 Newark, NJ 07101-4820

Sussex Pathology, LLG PO Box 66799 Falmouth, ME 04105-6799

SYNCB/Paypal Smart Conn PO Box 965005 Orlando, FL 32896

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Transworld Systems Inc. Collect. Agency 507 Prudential Road Horsham, PA 19044

U.S. Department of Education PO Box 530260 Atlanta, GA 303530260

Washington Mutual Bank PO Box 99604 Arlington, TX 76096-9604

Fill in t	this information to identify your case:					s directe	ed in this form an	nd in Form
Debtor	1 Jan Dospel		2	22A-1Su	pp:			
	-			_				
Debtor:	2 <b>Eva Dospel</b> e, if filing)		<u></u>	■ 1. Th	nere is no pres	umption	of abuse	
` '	States Bankruptcy Court for the: District of New Je	ersey		а		nade und	nine if a presumption der <i>Chapter 7 Meai</i> m 224-2)	
Case no	umber				`		ot apply now because	oo of
(if know							but it could apply l	
				□ Che	eck if this is a	n amen	ded filing	
Offic	ial Form 22A - 1						g	
	pter 7 Statement of Your Cu	rrant Mai	nthly In	come	3			40/4
Sila	pter / Statement of Tour Cul	ITEIIL WIO	illing iii	COIIIC	<del></del>			12/14
ddition ou do i	s needed, attach a separate sheet to this form. Inches pages, write your name and case number (if k not have primarily consumer debts or because of aption of Abuse Under § 707(b)(2) (Official Form 2 Calculate Your Current Monthly Income	nown). If you b f qualifying mil	elieve that yo	ou are ex	empted from	a presu	mption of abuse b	ecause
1. <b>W</b> l	hat is your marital and filing status? Check one o	nly.						
	Not married. Fill out Column A, lines 2-11.							
	Married and your spouse is filing with you. Fill o	ut both Columns	s A and B, line	es 2-11.				
	Married and your spouse is NOT filing with you.	You and your	spouse are:					
	☐ Living in the same household and are not leg	ally separated.	Fill out both C	Columns /	A and B, lines	2-11.		
	☐ Living separately or are legally separated. fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally separate	d under nonb	ankruptcy	law that appli	es or tha		
case of yo incor	n the average monthly income that you received a 11 U.S.C. § 101(10A). For example, if you are filing our monthly income varied during the 6 months, add the amount more than once. For example, if both spothave nothing to report for any line, write \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to report for any line \$0 in the spanning to the spannin	g on September the income for a ouses own the sa	15, the 6-mor Il 6 months ar	nth period nd divide t	l would be Mar the total by 6. I	ch 1 thro Fill in the	ough August 31. If t result. Do not inclu	the amount ude any
				Colum Debto		Colum Debto non-fi		
	our gross wages, salary, tips, bonuses, overtime, ayroll deductions).	and commissi	ons (before a	s <u> </u>	3,519.76	\$	834.08	
	<b>limony and maintenance payments.</b> Do not include blumn B is filled in.	e payments from	a spouse if	\$	0.00	\$	0.00	
<b>of</b> fro an	Il amounts from any source which are regularly p you or your dependents, including child support om an unmarried partner, members of your househol nd roommates. Include regular contributions from a s led in. Do not include payments you listed on line 3.	<ul> <li>t. Include regula</li> <li>d, your depende</li> </ul>	r contributions ents, parents,	S	0.00	\$	0.00	
5. <b>N</b> e	et income from operating a business, profession,	, or farm						
	ross receipts (before all deductions)	\$ 0.00						
	rdinary and necessary operating expenses	-\$ 0.00		•	0.00	Φ.	0.00	
	et monthly income from a business, profession, or fai	rm \$ <u>U.00</u>	Copy here	-> <b>»</b>	0.00	\$	0.00	
	et income from rental and other real property	\$ 0.00						
	ross receipts (before all deductions) rdinary and necessary operating expenses	-\$ 0.00	•					
	et monthly income from rental or other real property		Copy here	<b>-&gt;</b> \$	0.00	\$	0.00	
7 Ind	toroot dividends and revolting	Ψ		·	0.00	\$	0.00	

Official Form 22A-1

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Debto Debto				Case numbe	er ( <i>if known</i> )			
				Column A Debtor 1		Column I Debtor 2 non-filin		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a ben	efit under					
	For you\$		0.00					
	For your spouse \$		0.00					
9.	<b>Pension or retirement income.</b> Do not include any arbenefit under the Social Security Act.	nount received that v	vas a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spar Do not include any benefits received under the Social streetived as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total on line 10c.	Security Act or paymenanity, or internation	ents al or					
	10a.			\$	0.00	\$	0.00	
	10b.			\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	3,519.76	+	1,059.08	=	4,578.84
	<u> </u>						Total o	current monthly e
Part	2: Determine Whether the Means Test Applies to	o You						
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	•		Сор	y line 11	here=> 1	2a. \$	4,578.84
	Multiply by 12 (the number of months in a year)						x	12
	12b. The result is your annual income for this part of the	e form				1:	2b. \$	54,946.08
13.	Calculate the median family income that applies to	you. Follow these st	eps:					
	Fill in the state in which you live.	NJ	]					
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size	of household.				. 1	3. \$	70,845.00
4.4	Have do the lines commerce?							
14.	How do the lines compare?		ala a al . la a	. 4 . Thana ia				
	<ul> <li>Line 12b is less than or equal to line 13. C Go to Part 3.</li> <li>Line 12b is more than line 13. On the top of the second se</li></ul>							2A-2.
	Go to Part 3 and fill out Form 22A-2.							
Part								
	By signing here, I declare under penalty of perjury	that the information	on this sta	atement and	in any att	achments is	s true and c	orrect.
	X /s/ Jan Dospel	X	/s/ Eva	<u>-</u>				
	Jan Dospel Signature of Debtor 1		Eva Do Signatur	<b>spel</b> e of Debtor :	2			
	Date March 31, 2015	Date	March :		_			
	MM / DD / YYYY		MM / DD					
	If you checked line 14a, do NOT fill out or file Form							
	If you checked line 14b, fill out Form 22A-2 and fil	a it with this torm						

Jan Dospel

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 Debtor 1
 Jan Dospel

 Debtor 2
 Eva Dospel

 Case number (if known)

# **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 09/01/2014 to 02/28/2015.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **T&B** Income by Month:

6 Months Ago:	09/2014	\$3,471.33
5 Months Ago:	10/2014	\$3,471.33
4 Months Ago:	11/2014	\$3,471.33
3 Months Ago:	12/2014	\$3,471.33
2 Months Ago:	01/2015	\$3,881.28
Last Month:	02/2015	\$3,351.95
	Average per month:	\$3,519.76

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Debtor 1 Debtor 2 Eva Dospel Case number (if known)

# **Current Monthly Income Details for the Debtor's Spouse**

### **Spouse Income Details:**

Income for the Period 09/01/2014 to 02/28/2015.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Iristree Corp

Income by Month:

6 Months Ago:	09/2014	\$1,668.15
5 Months Ago:	10/2014	\$1,668.15
4 Months Ago:	11/2014	\$1,668.15
3 Months Ago:	12/2014	\$0.00
2 Months Ago:	01/2015	\$0.00
Last Month:	02/2015	\$0.00
	Average per month:	\$834.08

## Line 8 - Unemployment compensation (included in CMI)

Source of Income: Unemployment

Income by Month:

6 Months Ago:	09/2014	\$0.00
5 Months Ago:	10/2014	\$0.00
4 Months Ago:	11/2014	\$0.00
3 Months Ago:	12/2014	\$450.00
2 Months Ago:	01/2015	\$450.00
Last Month:	02/2015	\$450.00
	Average per month:	\$225.00